	Δη	onnued for use the	PTO/SB/30 (04-05) bugh 07/31/2006, OMB 0631-0031	EB 0 5 2008					
Under the Paperwork Reduction Act of 1995, no persons are requir	U.S. Ratent and Trac	demark Cilice: U.S.	DEPARTMENT OF COMMERCE						
Request	Application Number	10/664,7		7					
for	Filing Date	18 September 2003							
Continued Examination (RCE) Transmittal	First Named Inventor	LI, Yufen	g						
Address to: Mail Stop RCE	Art Unit	2178		_					
Commissioner for Patents	Examiner Name	Termanlı	ni, Samir						
P.O. Box 1450 Alexandria, VA 22313-1450	Attornéy Docket Number	2002P15	2002P15652US01 (1009-039)						
This is a Request for Continued Examination (RCE) to Request for Continued Examination (RCE) practice under 37 CF 1985, or to any design application. See instruction Sheet for RCC	R 1.114 does not apply to any u Es (not to be submitted to the US	itility or plant app SPTO) on page 1	lication filed prior to June 8, 2.						
 Submission required under 37 CFR 1.114 Not amendments enclosed with the RCE will be entered in the applicant does not wish to have any previously filed unen amendment(s). 	e order in which they were filed u tered amendment(s) entered, ap	unless applicant i pilicant must requ	nstructs otherwise, If gest non-entry of such						
a. Previously submitted, if a final Office action is considered as a submission even if this box is		ed after the final	Office action may be						
i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on									
b. Enclosed									
b. Enclosed I. Amendment/Reply									
ii. X Affidavit(e)/ Declaration(e) iv. Other									
2. Miscellaneous									
Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period ofmonths. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(f) required) Other									
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. The Director is hereby authorized to charge the following fees, any underpayment of fees: or credit any overpayments, to Deposit Account No									
RCE fee required under 37 CFR 1.17(e)									
ii. Extension of time fee (37 CFR 1.138 and 1.17)									
UI. Other									
b. Check in the amount of \$enclosed									
c. Payment by credit card (Form PTO-2038 enoises WARNING: Information on this form may become public. Co card information and authorization on PTO-2038.		not be included	on this form. Provide credit						
	NT. ATTORNEY, OR AGENT R	FOURED		1					
Signature milel 7. Hay	Da Da		2/5/2008	1					
Name (Print/Type) Michael N. Haynes	Ré	gistration No.	40,014	1					
	f Mailing or transmission								
I hereby certify that this correspondence is being deposited with the Units addressed to: Mell Stop RCE, Commissioner for Petents, P. O. Box 1450 Office on the date shown below. Signature	ed States Postal Service with sufficier), Alexandria, VA 22313-1450 or facti	nt postage as first o imile transmitted to	fass mall in an envelope the U _i S. Patent and Trademark						
Name (Print/Type)	Date								
This collection of information is required by 37 CFR 1.114. The informat to process) an application. Confidentiality is governed by 35 U.S.C. 122	on is required to obtain or retain a be and 37 CFR 1.11 and 1.14. This co	plaction is estimate	which is to file (and by the USPTO d to take 12 minutes to complete,	ı					

including gathering, preparing, and elabriting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office. U.S. Department of Commerce, P.O. Box: 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

02/05/2008 PCHOMP

00000066 10664754

01 FC:1801

810.00 OP

RECEIVED **CENTRAL FAX CENTER**

FEB 0 5 2008

PTO/SB/17 (12-04)
Approved for use through 07/31/2008, OMB 0561-0332
U.S. Petant and Trademark Office; U.S. DEPARTMENT OF COMMERCE or collection of information unless a statement of the commence.

Effective on 12/08/2004.			Complete if Known						
Fees oursuant to the Consolidated Appropriations Act. 2005:(H.R. 4818).		Application Number 10/664,754							
FEE TRANSMITTAL For FY 2005		Filing Date		18 September 2003					
		First Named Inver	nter LI, Yui	Li, Yufeng					
		Examiner Name		Termanini, Samir					
Applicant claims small	entity status.	See 37 CFR 1.27	Art Unit	2178	<u> </u>				
TOTAL AMOUNT OF PAYN	MENT (\$)	810.00	Attorney Docket N	lo. 2002P	15652US01	(1009-039)			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card. Money Order None Other (ploase identify).									
Deposit Account Deposit Account Number: 50-2504 Deposit Account Name: Michael N. Haynes									
					ply)				
Charge fee(s)	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below. Charge fee(s) indicated below, except for the fitting fee								
) or underpayments of f	🖂			, u			
under 37 CFR WARNING: Information on this	1.16 and 1.1	7		iny averpayment		credit card			
Information:and authorization of	on-PTO-2036.	ome public. Great cara ir	II OF MELION SHOULD FISE	De Incidaco en a	HB-101HI. FIONICE	e Great Card			
FEE CALCULATION		<u>.</u>							
1. BASIC FILING, SEAR	CH, AND E	XAMINATION FEES			*				
	FILING FI	ees Se ai		EXAMINATION					
Application Type		nall Entity Fee (8) Fee (Small Entity Si Fee (8)		<u>Entity</u> <u>e (8)</u>	Fees Paid (\$)			
Utility	300	150 500	250	200 10	00				
Design	200	100 100	.50	130	55' -				
Plant	200	100 300	150	160 8	80 _				
Reissuc	300	150 500	250	600 30	00 _				
Provisional	200.	100 0	.0	0	0 -				
2. EXCESS CLAIM FEE:	S					Small Entity			
Fee Description	. n :	· 				Fee (\$) Fee (\$) 25			
Each claim over 20 or, for Each independent claim o	r Keissues, e wer 3 or To	Reissues, each inde	ig more man in une Sendent claim mor	e than in the o	ni pinal natent	• •			
Multiple dependent claim		reisses, east man			g p	360 180			
Total Claims	xtra Claims		Paid (8)	<u>Multiple Depen</u>					
- 20 or HP = HP = highest number of total d		x 50 =	<u>U</u>	<u>Fee (\$)</u>	Fee Pald (<u>\$1</u>			
	xtra Claims		Pald (5)		0	-			
- 3 or HP = HP = highest number of indepe	Odout alolmo n		0			*			
	-	ac.ioi, a graziar mair s							
3. APPLICATION SIZE F If the specification and	'EE drawings ex	ceed 100 sheets of pa	mer, the application	on size fee due	is \$250 (\$12	5 for small entity)			
		fraction thereof. See	35 U.S.C. 41(a)(1	l)(G) and 37 C	FR 1.16(s).				
Total Sheets	Extra Sheet		ch additional 50 or			Fee Paid (\$)			
4. OTHER FEE(S) Fees Paid (6)									
Non-English Specification, \$130 fee (no small entity discount) Other: Request for Continued Examination (RCE): 810									
Offict: Rednest 101:00	nunued Exar	narauon:(RGE):::::							
SUBMITTED BY					-				
Signature	nidal 7.	Hayrea	Registration No. (Atterney/Agent)	10,014	Telephone, 4	34-972-9988			
Name (Print/Type) Michael N	l. Haynes				Date 05 Fe	b 2008			

This collection of information is required by 37 CFR 1.136. The information is required to obtain or ratein a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FRES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-800-PTO-9189 and select option 2.